## MONTANA STATE HAIL INSURANCE PROGRAM

## REQUEST FOR INSURANCE ON PREVIOUSLY HAILED ON CROP

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		-	_	ised by hail	<b> </b> •		
hail loss	s will be av	varded on the crop	until the fift	h day after	the prev		
	_	•					
	ninistration may re-	ninistrative Rule 4.4 r may request insure request must be me form must be come first loss may not hail loss will be average premaining after the	ninistrative Rule 4.4.317- REQUEST r may request insurance for a crop that e request must be made on a form fur e form must be completed in full and the first loss may not have more than a hail loss will be awarded on the crop the insured producer shall be charged the premaining after the first damage, and	ninistrative Rule 4.4.317- REQUEST FOR INSUR r may request insurance for a crop that has already e request must be made on a form furnished by the form must be completed in full and signed; e first loss may not have more than a 25% loss cau hail loss will be awarded on the crop until the fifte insured producer shall be charged the regular map remaining after the first damage, and if the crop	ninistrative Rule 4.4.317- REQUEST FOR INSURANCE ON a may request insurance for a crop that has already had hail de request must be made on a form furnished by the department of first loss may not have more than a 25% loss caused by hail hail loss will be awarded on the crop until the fifth day after the insured producer shall be charged the regular maximum ration remaining after the first damage, and if the crop should late	painistrative Rule 4.4.317- REQUEST FOR INSURANCE ON HAIL Is a range request insurance for a crop that has already had hail damage if the request must be made on a form furnished by the department; the form must be completed in full and signed; the first loss may not have more than a 25% loss caused by hail; thail loss will be awarded on the crop until the fifth day after the prevent insured producer shall be charged the regular maximum rate for insured premaining after the first damage, and if the crop should later be total	e form must be completed in full and signed;

PLEASE ATTACH THIS FORM TO A COMPLETED HAIL INSURANCE POLICY